

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Pacewad

## **COVER PAGE**

A PUBLIC DOCUMENT Please type or print in ink. NAME OF FILER (LAST) (FIRST) Goldstone Benjamin 1. Office, Agency, or Court Agency Name (Do not use acronyms) Natural Resources Division, Board, Department, District, if applicable Your Position Department of Conservation, Division of Oil Gas and Geothermal Resources **Engineering Geologist** ▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms) 2. Jurisdiction of Office (Check at least one box) State Judge or Court Commissioner (Statewide Jurisdiction) Multi-County \_\_\_\_\_ County of \_\_\_ City of \_\_\_\_\_ Other \_\_\_\_\_ 3. Type of Statement (Check at least one box) Annual: The period covered is January 1, 2018, through Leaving Office: Date Left \_\_\_\_/\_\_\_ (Check one circle.) December 31, 2018. The period covered is \_\_\_\_\_\_\_, through O The period covered is January 1, 2018, through the date of -or- leaving office. December 31, 2018. Assuming Office: Date assumed \_\_\_\_/\_\_\_/ The period covered is \_\_\_\_\_\_ through the date of leaving office. Candidate: Date of Election \_\_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_ 4. Schedule Summary (must complete) ► Total number of pages including this cover page: \_\_\_\_\_ Schedules attached Schedule A-1 - Investments - schedule attached Schedule C - Income. Loans, & Business Positions - schedule attached Schedule A-2 - Investments - schedule attached Schedule D - Income - Gifts - schedule attached

		reportable			
	cation		in a state of the		- None

Schedule B - Real Property - schedule attached

MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CHY		STATE	ZIP CODE
801 K st.	Sacrament	0	CA	95814
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS		
( 916 ) 862-2236	Benjamin.Goldstone@conservation.ca.gov			

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 2/11/2019	Signature 1	
(month. day, year)	(File the originally signed paper statement with your filing official.)	

Schedule E - Income - Gifts - Travel Payments - schedule attached